STATEMENT OF ORGANIZATION		OFFICE USE ONL	
1. Name and Address of Committee New Orlean EAST Leader Ship P.O. Box 58248 New Orleans, LA. 70158	2. Date of this Statement 10-06-2015 3. Estimated Membership 4. Amended Statement?	PAC 5/0 10/6	
Check If: New Committee	Yes	#89548	
5. All Committee Officers and Directors (including Chairperson, Treasurer, a. Name b. Position Chairperson Treasurer		fficers and directors) TRUAN N. O.LA.	70128
Affiliated Organizations (Any organization, other than a political committee, which directly or indicated as Name	irectly established, administers, or	financially supports this committee.) c. Relationship to Committee	J
7. All Depositories for Committee Funds (committee funds must be deposited in one or more banks or savings and loan institutions or money market mutual funds.) a. Name b. Address BullAed Aue. RRAnch			
8. IF THIS COMMITTEE SUPPORTS A SINGLE CANDIDATE: a. Chec Committee	ck one: Principal Campa	aign Committee Subsidiary	,
b. Name of Candidate		c. Office Sought by the Candidate	
9. a. Name of Person Preparing Report b. Daytime Telephone K/E じい BARNES	504-220-	ys31 2	15
10. WE HEREBY CERTIFY that the information contained in this STATEME and belief. This	50	d correct to the best of our known delige,	COMPANY FINANCE COMPANY FINANCE COMPANY FINANCE
Signature of Committee Treasurer, if any	Dayt	ime Telephone Number	-